



ALTA TRAVEL
American Latin Travel Agents

LETTER OF AUTHORIZATION TO CHARGE CREDIT CARD FORM AGENCY

I authorize **American Latin Travel Agents in America, Inc. (A.L.T.A)** to charge the credit card for the company _____ for each and every ticket requested and purchased by us for the full face value and amount of ticket (s) issued by A. L. T. A on our behalf.

Card Holder's Name On Card: _____

Credit Card Type: _____ **MasterCard** _____ **Visa** _____ **Amex**

Credit Card Number: _____ **Exp. Date:** _____

3 Digit Security Code _____ (3 digit number on the back of Visa and MasterCard, and for AMEX on the front of card)

Cardholder's Contact Information, including billing address:

Street Address: _____

Suite/Apt. No.: _____

City: _____

State _____

Country: _____ **Zip Code:** _____

Billing Address Phone: _____ **Alternate Phone:** _____

Billing Address Fax: _____ **Alternate Fax:** _____

Signature: _____ **Date:** _____

The completion of this authorization form signifies the acceptance and agreement to pay of all credit card charge as well as all charge backs, fees, debit memos, penalty fees, issued by the airline or any other supplier for any reason, and resulting from any actions taken by cardholder.

NOTE: Identification is required. Please provide Photostat copy of the Credit Card (Front & Back) And Passport or Driver's License of Cardholder.

FOR NOTARY USE ONLY

State Of _____ **County of** _____
Subscribed and sworn to before me

On this _____ **Day of** _____ **of** _____

